

## STATE OF TENNESSEE

## DEPARTMENT OF ENVIRONMENT AND CONSERVATION **DIVISION OF WATER RESOURCES**

Jackson Environmental Field Office 1625 Hollywood Drive Jackson, TN 38305

Phone 731-512-1300

Statewide 1-888-891-8332 Fax 731-661-6283

October 15, 2013

Mr. Johnny Townsend Public Works Director City of Camden e-copy: jrtownsend1@bellsouth.net PO Box 779 Camden, TN 38320

Subject: NPDES Tracking Number TNR121313

Camden WWTP City of Camden

Camden, Benton County, Tennessee

Dear Mr. Townsend:

The Division of Water Resources (division) acknowledges receipt of a certified Notice of Termination, on 16-SEP-13. This form was submitted according to Section 8.1.1 of the General NPDES Permit for Discharges of Storm Water Associated with construction Activities (TNR100000), which requires the operator to submit written certification that a site, or portion of a site has been finally stabilized and all storm water discharges associated from the construction activities that were authorized are eliminated.

If you have questions, please contact the division at your local Environmental Field Office at 1-888-891-TDEC; or, at this office, please contact me at (731) 512-1365 or by E-mail at Brian. Wallace@tn.gov.

Sincerely,

Brian Wallace

Division of Water Resources

Brian Woller

Jackson Environmental Field Office

cc: Division of Water Resources, Jackson Field Office



## TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION

Division of Water Resources

William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville TN 37243 1-888-891-8332 (TDEC)

Compliance Inspection for General NPDES Permit for Stormwater Discharges from Construction Activities (CGP)

Sit	e/Project Name: Camden	WWTP					NPDES Trackin	g Number:	TNR121313	
Sit	e/110ject Name. Camuen						Date Coverage w	vas Issued	24-JUN-11	
	Street Address or Location: Hildon King Road Start date:  Estimated end da									
Lo	Location: Estimated end d							ate:		
Sit	High flor	w channel renair for u	vastewater tre	atment	nlant		Latitude (dd.ddd	ld):	36.0475	
De	Description: High flow channel repair for wastewater treat				piant		Longitude (-dd.d	Longitude (-dd.dddd):		
County(ies): Benton EFO: Jackson MS4							Acres Disturbed: 6.19			
			Jurisdict	ion;			Total Acres:			
Na	me of Permittee (Developer/	Operator): City of Ca	amden							
Name of Official Contact: Johnny Townsend Email: jrtov				wnsend	1@be	llsouth.net		Contact Pho	ne: 731-584-4656	
Ad	dress: PO Box 779		City: Camd	en				<b>State:</b> TN <b>Zip:</b> 38320		
Check List (office & field checks)					No		Comm	ents		
1	Does the site have CGP cov	erage?								
2	Is NOC posted on site?	-		T						
3		ave the site contractors signed the NOI?								
4	_					unkno	known			
5		EPSCs in accordance with SWPPP?			Ħ					
6	Are EPSCs installed properl	ly and functional?		Ħ	Ħ					
7		Are inspection reports available on site?			Ħ		unknown			
8	Is the proper buffer zone ma			IT		10	n/a			
9	Were there unstable, inactive areas on the site? If so, does inspector know if length of time has been more than 14 days (or 7 days for steep slopes)?									
10	Are more than 50 acres disturbed at one time?			П	Ø					
11	The state of the s			İΠ						
12				T	Ø					
13	Are there unauthorized alter	ations to waters of the	State?	T	Ø					
14	Are there violations of an existing ARAP? If so, ARAP No.?									
15	Other pollutants/discharges	or unusual problems?			$\boxtimes$					
16	Project is complete and stable with no construction-related stormwater discharges?			$\boxtimes$						
Ger	neral Comments:									
	e work is complete and si propriately. TNCGP cov				nstrea	am low-water	crossing appears t	o be function	ing	
	Routine	Comprehensive		Con	plaint		Follow Up	Termin	nation 🗵	
Charles and the	Site Contact (if available)								Date:	
On-Site Contact Name (Print): John Beasley On-Site Contact Title:					Signat	ture:	ı			
TDE	EC Personnel/Information	Was a comment		ARE		N. S.		EFO: Name a	nd Address	
Inspector's Name (Print):  Brian Wallace  Signature:  Fuen			rall	ne	Date:	10-10-13	ckson Environme 1625 Hollyw Jackson, T			

<b>SEPA</b>	ited States Environmental Pro Washington, D. C. 20	otection Agency 0460		
Water	Compliance Insp	ection Report		
	Section A: National Da	ta Coding (i.e. PCS)	L	
Transaction Code NPDES	yr/mo/	dy Ins	pection I	nspector FacType
1 N 2 5 3 TNR / 2 /	3 1 3  11 12   <u>/ 3</u>	1/ 0 / 0	18 3	19 5 20 2
21				66
Inspection Work Days Facility Self-Monitor		QA	F	leserved
67 69 Rating	71	72 73	74         78	80
	Section B: Fa			
Name and Location of Facility Inspected (For inc POTW name and NPDES permit number)	ustrial users discharging to POT	W, also include Entr	y Time / Date	Permit Effective Date
			Time / Date	Permit Expiration Date
Name(s) of On-Site Representative(s)/Title(s)/Ph	ber Channel Kepi	1/n 13	72/10-10-1	7
Name(s) of On-Site Representative(s)/Title(s)/Ph	one and Fax Number(s)	Othe desc	er Fa¢ilīty Data (e. Eriptive information	g., SIC NAICS, and other
			()	•
				* 2
Name, Address of Responsible Official/Title/Phor	e and Fax Number			
- 14				
	Co	ontacted		
	-	Yes No		
Section C: Are	eas Evaluated During Inspect	ion (Check only those ar	eas evaluated)	
	elf-monitoring Program	Pretreatment Progra	ım 🔲	MS4
	ompliance Schedule	Pollution Prevention		
Facility Site Review	boratory	Storm Water		1
	peration & Maintenance	Combined Sewer O	verflow	
Flow Measurement SI	udge Handling / Disposal	Sanitary Sewer Ove	rflow	
	Section D: Summary of			
(Attach additional sheets o	f narrative and checklists, inc		ation codes, as	necessary)
SEV Codes SEV Descrip				
	for to TDEC	Form		
	0			
H H H H H				
Name (s) and Signature(s) of Inspector(s)	Agency/Office/Phor	ne and Fax Numbers	Date	
1.1	Tennessee Division	Duit		
B'Wellow	6	/⊏	AVA /	2-11-12
to veri		(F.	4X) (	1011
Signature of Management Q A Reviewer	Agency/Office/Phor		Date	
	Tennessee Division	of Water Resources		
		(F.	AX)	